Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

032901.0029

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN	
TOTAL CLAIMS					(Colonia)		f	RATE	FEE		RATE	FEE
			20									
FOR			NUMBER FILED		NUMB	ER EXTRA	4 1	BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			20 _minus 20=		* 6		4	X\$ 9=		OR	X\$18=	-
INDEPENDENT CLAIMS			×	nus 3 =	Ø_			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT	./			] [	+140=		OR	+280=	
* If the difference in column 1 is le			ess than zero, enter "0" in			olumn 2		TOTAL ,	378,00	OR	TOTAL	
	C	LAIMS AS A	MENDED	NDED - PART II				C			OTHER THAN	
(Column 1)			(Colum		mn 2)	(Column 3) SMAL		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	<b>↓</b> [	X\$ 9=		OR	X\$18=	,
	Independent	*	Minus	***		=		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	CLAIM		┙╽	+140=		OR	+280=	
								TOTAL			TOTAL	
	(Column 1) (Column 2) (Co							ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS	(Column 3	3)		.==:	1					
AMENDMENT B		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent			- 01	=		X42=		OR	X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		<b>-</b>	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)								-,		ADDII. FEE	<del> </del>
		CLAIMS		HIGH	IEST		Пг		ADDI-			ADDI
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=			X84=	
	FIRST PRESE	ILTIPLE DEPENDENT		T CLAIM		$\Box$	772-		OR			
+140=										OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  OR										TOTAL ADDIT. FEE		
		nher Previously Pa						ind in the ani	oronriate bo	x in co	lumo 1.	